

APPLICATION FOR FINANCIAL ASSISTANCE TO ATTEND WESTERN MCH
EPIDEMIOLOGY CONFERENCE IN PORTLAND, OREGON JUNE 14-15, 2001

Use an additional page where necessary to answer questions.

PART 1: APPLICATION: To apply for financial assistance, please complete and return this application no later than March 15, 2001. Forms should be sent to Ken Rosenberg by mail, fax or e-mail.

Name:

Title:

Affiliation:

Address:

City:

Phone:

Fax:

E-mail:

PART 2: Categories of Financial Assistance Requested. Please consider me for the types of assistance marked below. NOTE: CHECK EACH TYPE OF ASSISTANCE YOU WISH TO REQUEST.

☐ Lodging: A maximum of two nights lodging may be provided per person.

Recipients are responsible for incidental charges.

☐ Travel: Travel arrangements will be made by the conference organizers.

PART 3: Will you receive funding assistance from any other source?

☐ Yes ☐ No

Please explain why assistance is being requested.

What alternatives do you have for funding to attend the conference? (State Health Departments: Have you explored MCHB Technical Assistance money to cover travel expenses)?

PART 4. How would your coming to the conference benefit you and your organization?

PART 5. What other people from your organization are planning to attend the conference?

PART 6. What is your plan for sharing what you learn with your co-workers when you return from the conference?

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